



Attorney Customer No. 27682

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re US Patent Application of:)	
)	
Merrill Brooks SMITH)	
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Serial No.: 10/712,182)	Group Art Unit: 2876
Eiling Data: Navambar 12, 2002)	Examiner: A. Trail
Filing Date: November 13, 2003)	Exammel. A. Han
Title: KEYCARD FOR AUTOMATING	<u> </u>	
TRANSACTION REQUESTS	j	
	,	

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8

Mail Stop Amendment

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First-Class Mail in an envelope addressed to:

Mail Stop Amendment

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

April 26, 2006 . on ___ Date

Signature

Gail W. O'Brien

Typed or printed name of person signing Certificate

Documents being submitted with this Certificate of Mailing under 1.8 are:

- Amendment/Response to the Office Action dated February 9, 2006 under 37 C.F.R. § 1.111;
- Response Transmittal Letter;
- Self-addressed stamped return postcard.

HUNTON & WILLIAMS LLP Riverfront Plaza, East Tower 951 East Byrd Street Richmond, VA 23219 (804) 788-8200 (Telephone) (804) 788-8218 (Facsimile)



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In re US Patent Application of:)
Merrill Brooks SMITH))
Serial No.: 10/712,182) Group Art Unit: 2876
Filing Date: November 13, 2003) Examiner: A. Trail
Title: KEYCARD FOR AUTOMATING TRANSACTION REQUESTS))

RESPONSE TRANSMITTAL LETTER

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed is an Amendment under 37 C.F.R. § 1.111 in response to the Official Action mailed February 9, 2006 in connection with the above-identified patent application.

[]	A petition for a One-Month Extension of Time is also enclosed.
[]	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) is also enclosed.
[X]	No additional claim fee is required.
[]	An additional claim fee is required, and is calculated as shown below:

		CLAI	IMS .		0.17
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	62	Minus 64 =	0	x \$50.00 =	.00
Independent Claims	5	Minus 6 =	0	x \$200.00 =	.00
If Amendment adds multiple dependent claims, add \$360.00					.00
Total Amendment Fee				.00	
If small entity status is claimed, subtract 50% of Total Amendment Fee				.00	
TOTAL ADD	ITIONAL FE	E DUE FOR THI	S AMENDM	ENT *	\$.00

	Charge \$.00 to Deposit	Account No.	08-3436 tor	the fee due
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- [] Check No. ____ in the amount of \$_____.00 is enclosed for the fee due.
- [X] A Mail Certificate Under 37 C.F.R. §1.8.
- [X] Self-addressed stamped postcard.
- [X] The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §1.16, 1.17 and 1.21 that may be required by this paper to Deposit Account No. 08-3436.

Date: April 26, 2006

Respectfully submitted,

Hunton & Williams LLP

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Registration No. 5